

08-02-01

UTILITY

PATENT APPLICATION
TRANSMITTAL

Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	01-193	Total Pages	2
First Named Inventor or Applicant Identifier		Ball et al.	
Title : METHOD FOR MAKING PHOTOMASK MATERIAL BY PLASMA INDUCTION			
Express Mail Label No.	EL689105085US		

10/10/80

CERTIFICATE OF EXPRESS MAIL UNDER 37 CFR 1.10:

I certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is Addressed to the Commissioner of Patents and Trademarks, Washington, DC 20231

on Aug. 1, 2001

(Date)

Signature Colleen E. Doherty
Colleen E. Doherty

"EXPRESS MAIL" Mailing Label No. EL689105085US

ADDRESS TO:
Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231



1. <input checked="" type="checkbox"/> * Fee Transmittal Form <i>(Submit an original and a duplicate for fee processing)</i>	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)		
2. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i>	[Total Pages] 11	6. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>	
- Descriptive title of the Invention			a. <input type="checkbox"/> Computer Readable Copy
- Cross References to Related Applications			b. <input type="checkbox"/> Paper Copy (identical to computer copy)
- Statement Regarding Fed sponsored R&D			c. <input type="checkbox"/> Statement verifying identity of above copies
- Reference to Microfiche Appendix			
- Background of the Invention			
- Brief Summary of the Invention			
- Brief Description of the Drawings (if filed)			
- Detailed Description			
- Claim(s)			
- Abstract of the Disclosure			
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113)	[Total Sheets] 4	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
4. <input checked="" type="checkbox"/> Oath or Declaration	[Total Pages] 2	8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>	
a. <input checked="" type="checkbox"/> Unexecuted (original or copy)	9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>		
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <i>(for continuation/divisional with Box 16 completed)</i>	10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	11. <input type="checkbox"/> Preliminary Amendment		
	12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(should be specifically itemized)</i>		
	13. <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Other: <i>(if foreign priority is claimed)</i>		

ACCOMPANYING APPLICATION PARTS

7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	15. <input type="checkbox"/> Other:
8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>	
9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
11. <input type="checkbox"/> Preliminary Amendment	
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(should be specifically itemized)</i>	
13. <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Other: <i>(if foreign priority is claimed)</i>	

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: 08/

Prior application information: Examiner: Group / Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

 Customer Number or Bar Code Label

or Correspondence address below

NAME	Timothy M. Schaeberle				
ADDRESS	Corning Incorporated, SP-TI-3-1				
CITY	Corning	STATE	NY	ZIP CODE	14831
COUNTRY	USA	TELEPHONE	(607) 974-3164	FAX	(607) 974-3848
Name (Print/Type)	Timothy M. Schaeberle		Registration No. (Attorney/Agent)	34,424	
Signature			Date	8/9/01	

FEE TRANSMITTAL for FY 2000

<i>Complete if Known</i>	
Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Ball, Laura
Examiner Name	To Be Assigned
Group / Art Unit	To Be Assigned
TOTAL AMOUNT OF PAYMENT	(\$) 764.00
METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **03-3325**

Deposit Account Name **Corning Incorporated**

Charge Any Additional Fees Required Under 37 C.F.R. §§ 1.16 and 1.17

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Fee Description	Fee Paid
101 710	Utility filing fee	<u>710.00</u>
106 320	Design filing fee	
107 490	Plant filing fee	
108 710	Reissue filing fee	
114 150	Provisional filing fee	
SUBTOTAL (1)		(\$) 710.00

2. EXTRA CLAIM FEES

	Extra Fee from Claims below	Fee Paid
Total Claims	23 - 20** = 0 x 18 =	54.00

Independent Claims	3 - 3** = 0 x 80 =	00.00
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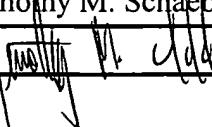
Multiple Dependent	0 =	0.00
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**or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Fee Description
103 18	Claims in excess of 20
102 80	Independent claims in excess of 3
104 270	Multiple dependent claim, if not paid
109 80	** Reissue independent claims over original patent
110 18	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)	(\$) 54.00

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	Surcharge - late filing fee or oath	
127 50	Surcharge - late provisional filing fee or cover sheet	
139 130	Non-English specification	
147 2,520	For filing a request for reexamination	
112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840	Requesting publication of SIR after Examiner action	
115 110	Extension for reply within first month	
116 390	Extension for reply within second month	
117 890	Extension for reply within third month	
118 1,390	Extension for reply within fourth month	
128 1,890	Extension for reply within fifth month	
119 310	Notice of Appeal	
120 310	Filing a brief in support of an appeal	
121 270	Request for oral hearing	
138 1,510	Petition to institute a public use proceeding	
140 110	Petition to revive - unavoidable	
141 1,240	Petition to revive - unintentional	
142 1,240	Utility issue fee (or reissue)	
143 440	Design issue fee	
144 600	Plant issue fee	
122 130	Petitions to the Commissioner	
123 50	Petitions related to provisional applications	
126 240	Submission of Information Disclosure Stmt	
581 40	Recording each patent assignment per property (times number of properties) _____ X	
146 710	Filing a submission after final rejection (37 C.F.R. § 1.129(a))	
149 710	For each additional invention to be examined (37 C.F.R. § 1.129(b))	
Other fee (specify) _____		
Other fee (specify) _____		
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)

SUBMITTED BY		Completed (if applicable)	
Name (Print/Type)	Timothy M. Schaeberle	Registration No. (Attorney/Agent)	34,424
Signature		Date	6/01/01